

## **To: Institutional Providers and Hospice Providers**

RE: Processing of Hospice Recipient Status Change Form (165B) and Long Term Care Request for Action Forms (161A)

Effective **immediately** APS Healthcare will assume the responsibility for processing Hospice Recipient Status Change Form (165B) and Long Term Care Request for Action Forms (161A).

Please fax these requests to the following:

APS Healthcare 1640 Phoenix Boulevard, Suite 200 Atlanta, Georgia 30349

Fax: 1-770-991-5429